



Please fill out the following emergency information for your business as to who you would like contacted after hours in case of a fire. If you include pager or cell phone numbers, please note next to the telephone number which it is.

This is for **fire department** office records and **emergency** use only.

Thanks for your co-operation.

Business Name _____

Address _____ Suite # _____

City _____ Zip _____

Complex or Strip Center Name _____

Type of Business _____

Telephone _____ Fax _____

Business Hours: Daily _____ Sat. _____ Sun. _____

Owners Name _____

Owners Phone Number _____

Emergency Call List

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Alarm Company _____ Phone _____

Greenwood Fire Department
155 E. Main St.
Greenwood, IN 46143

Phone (317)882-2599

Fax (317)887-5627